|  |   |                         |                                |               |                              |                                      |       |                     | 10/1                         | 4      | 381        | 9               |  |
|--|---|-------------------------|--------------------------------|---------------|------------------------------|--------------------------------------|-------|---------------------|------------------------------|--------|------------|-----------------|--|
|  |   |                         |                                |               |                              |                                      |       | A                   | Application or Docket Number |        |            |                 |  |
|  | PATENT APPLICATION FEE DETERMINATION RECORD     |                         |                                |               |                              |                                      |       |                     |                              |        |            |                 |  |
| Effective October 1, 2003  |   |                         |                                |               |                              |                                      |       | 19743819            |                              |        |            |                 |  |
|  |   | SMALL ENTITY OTHER THAN |                                |               |                              |                                      |       |                     |                              |        |            |                 |  |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)                                 |   |                         |                                |               |                              |                                      |       | TYPE [              |                              | OR     | SMALL      |                 |  |
| TOTAL CLAIMS   |   |                         | لغر                            | ,             |                              |                                      |       | RATE                | FEE                          |        | RATE       | FEE             |  |
| FOR  |   |                         | NUMBER FILEO                   |               | NUMBER EXTRA                 |                                      |       | BASIC FEE           | 385.00                       | OR     | BASIC FEE  | 770.00          |  |
| TOTAL CHARGEABLE CLAIMS  |   |                         | Co minus 20=                   |               | 9 9                          |                                      |       | X\$ 9=              | 180                          | OR     | X\$18=     |                 |  |
| INDEPENDENT CLAIMS   |   |                         | > minus 3 =                    |               | ٩                            |                                      |       | . X43=              |                              | OR     | X86≠       |                 |  |
| MULTIPLE DEPENDENT CLAIM P   |   |                         | RESENT                         |               | C.                           |                                      |       | +145=3              |                              | OR     | +290=      |                 |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2       |   |                         |                                |               |                              |                                      |       | TOTAL               | 565                          | OR     | TOTAL      |                 |  |
|  |   |                         |                                |               |                              |                                      |       |                     | 065                          | Jon    | OTHER      | THAN            |  |
| 4/21/05 (Column 1) (Column 2) (Column 3)                                       |   |                         |                                |               |                              |                                      |       | SMALL               | ENTITY                       | OR     | SMALL      |                 |  |
| ZT A   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,         | CLAIMS                  |                                | HIGH          | EST                          | PRESENT<br>EXTRA                     | 1     |                     | ADDI-                        |        |            | ADDI-           |  |
|  |   | REMAINING<br>AFTER      |                                | PREVIO        | USLY                         |                                      |       | RATE                | TIONAL<br>FEE                |        | RATE       | TIONAL<br>FEE   |  |
| )ME  | Total   | · 37                    | Minus                          | - 4           | 0                            | <b>-</b> .                           |       | X\$ 9=              |                              | OR     | X\$18=     |                 |  |
| AMENDMENT A  | Independent                                     | . 6                     | Minus                          | ***           | 3                            | - 3                                  |       | /50 · ·             | 300                          | OR     | X86=       |                 |  |
| Ą  | FIRST PRESENTATION OF MULTIPLE DEPENDENT        |                         |                                |               | CLAIM                        |                                      |       | 446                 |                              |        | +290=      |                 |  |
|  |   |                         |                                |               |                              |                                      |       | +145=               |                              | OR     | TOTAL      |                 |  |
| 1/6/16/  |   |                         |                                |               |                              |                                      |       | TOTAL<br>ADDIT. FEE | L                            | OR     | ADDIT. FEE | <u> </u>        |  |
| 1/35/05 (Column 1) (Column 2) (Column 3)                                       |   |                         |                                |               |                              |                                      |       |                     |                              |        |            |                 |  |
| ENT B  | 7. 1.   | CLAIMS<br>REMAINING     |                                | NUM           |                              | PRESENT                              |       | rate ,              | ADDI-<br>TIONAL              |        | RATE       | ADDI-<br>TIONAL |  |
|  |   | AFTER AMENDMENT         | ·                              | PREVI<br>PAID |                              | EXTRA                                |       | . 441 4. 5          | FEE                          |        | 79472      | FEE             |  |
| MENDMENT   | Total   | . 37                    | Minus                          | ***           | 90                           | = /                                  |       | X\$ 9=              |                              | OR     | X\$18=     |                 |  |
| AME  | Independent                                     | . 6                     | Minus                          | ***           | 3                            |                                      |       | X43≈                |                              | OR     | X86=       |                 |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                         |                                |               |                              |                                      |       | +145=               |                              | ОЯ     | +290=      |                 |  |
| ,  |   |                         |                                |               |                              |                                      |       | TOTAL               |                              | ОЯ     | TOTAL      |                 |  |
|  |   |                         |                                |               |                              |                                      |       | ADDIT. FEE          | L                            | ,      | ADDIT, FEE |                 |  |
| _  | (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST |                         |                                |               |                              |                                      |       |                     | 400                          | ı.     |            | ADDI-           |  |
| 2  | `   | REMAINING<br>AFTER      |                                | NUN           | IBER<br>OUSLY                | PRESENT<br>EXTRA                     |       | RATE                | ADDI-<br>TIONAL              |        | RATE       | TIONAL          |  |
| EZ   |   | AMENDMENT               |                                |               | FOR                          |                                      | 4     |                     | FEE                          |        |            | FEE             |  |
| AMENDMENT C  | Total   | •                       | Minus                          |               |                              | e                                    |       | X\$ 9≈              |                              | OR     | X\$18=     |                 |  |
| ME   | Independent                                     | ٠                       | Minus                          |               |                              | =                                    | ▋     | X43=                |                              | OR     | X86=       |                 |  |
| ٢  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                         |                                |               |                              |                                      |       | +145=               |                              | OR     | +290=      |                 |  |
| the color is colored to be strengthe entry in column 2, write "0" in column 3. |   |                         |                                |               |                              |                                      |       |                     |                              |        |            | <u> </u>        |  |
| -  | If the Highest No                               | mber Previously Pa      | aid For IN TH<br>aid For IN TH | IS SPACE      | is less that<br>is less that | in 20, enter 720<br>in 3. enter 13.1 |       | ADDIT. FEE          | <u> </u>                     | OR     | ADDIT. FEE |                 |  |
|  | The Highest Nur                                 | imber Previously Pa     | id For (Total o                | r Independ    | lent) is the                 | highest numb                         | er fo | und in the ap       | propriate bo                 | n in a | olumn 1.   |                 |  |

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